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## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1.	(a) Name of Individual, Organization or Corporation		
	AMERICAN FEDERATION OF STATE COUNTY AND MUNICIPAL EMPLOYEES AFL-CIO		
	(b) Address (number and street)		
	(c) City, State and ZIP Code	0 FF011 27 2 N 1	
	WASHINGTON DC 20036	FEC Identification Number	
2.	Corporate filers only	<b>C</b> C90011172	
	Is the filer a qualified nonprofit corporation?		
	Individual filers only  Name of Employer	Occupation	
	4. TYPE OF REPORT (check appropriate boxes):		
	(a) April 15 Quarterly Report	Notice	
	☐ July 15 Quarterly Report		
☐ October Quarterly Report			
☐ January 31 Year-End Report			
	□ January St. real-End neport		
	(b) Is this Report an amendment? Yes \( \subseteq \text{No } \( \text{X} \)		
	5. COVERING PERIOD: FROM M, M, M, D, D, D, T, Y,		
	THROUGH		
	1 0 / D D / Y Y Y Y Y		
	6. TOTAL CONTRIBUTIONS	.00	
	7. TOTAL INDEPENDENT EXPENDITURES	149998.80	
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.			
T	YPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE	
s	TEPHEN GRAHAM	10/28/2010	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.			

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100